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1654

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial Number: 09/716,890
Filing Date: 11/20/2000
Confirmation: 5003
Applicant: David N. S. Hon
Assignee: Greystone Medical Group, Inc.
Title: Compositions Of Oak Bark Extract Related Synthetic
Compositions And Method Of Using Same
Docket Number: 29290.00
Examiner: Patricia A. Patten
Tech Center: 1654
Express Mail: EV 434156351 US

RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

MAILED April 7, 2004

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant has received and noted the above identified communication from the Legal Instruments Examiner and makes response as follows:

A complete listing of all Claims begins on Page 2 of this Paper.

Remarks begin on Page 3 of this Paper.



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031
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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/716,890	
	Filing Date	November 20, 2000	
	First Named Inventor	KAPPOS, et al.	
	Art Unit	1654	
	Examiner Name		
Total Number of Pages in This Submission	4	Attorney Docket Number	29290.00

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Paul E. Hodges
Signature	<i>Paul E. Hodges</i>
Date	4/16/04

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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